

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	S. Z		11-32-00
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>CB</i>	555	11-15-01
RESPONSE FORMALITY REVIEW	R.B	1076	06/03/02

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 — (Through numeral) ... Canceled A Appeal
 ÷ Restricted 0 Objected

Claim	Date
Final	
Original	
42	
1	
03	
2	✓
3	✓
4	✓
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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